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http://A16/PALM/OBJECT/JACKET?SER_NUM=09264174

Printed 02/01/2001

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET
09/264,174	03/05/1999	340	2632	7175-61512

APPLICANT

CARL W RILEY, MILAN, INDIANA; (STEVE A DIXON, HAMILTON, OHIO; DOUGLAS J
MENKEDICK, GUILFORD, INDIANA; WILLIAM L JACQUES, BATESVILLE) INDIANA;
JAMES W JONES, GAINESVILLE, FLORIDA; JAMES K FINDLAY, FISHERS, INDIANA.

CONTINUING DOMESTIC DATA***
VERIFIED

371 (NAT'L STAGE) DATA***
VERIFIED

FOREIGN APPLICATIONS***
VERIFIED

FOREIGN FILING LICENSE GRANTED 03/24/1999

Foreign priority claimed <input type="radio"/> yes <input checked="" type="radio"/> no 35 USC 119 (a-d) conditions met <input type="radio"/> yes <input checked="" type="radio"/> no <input type="radio"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and acknowledged Examiner's Name Initials	IN	14	67	5

ADDRESS

TIMOTHY E. NIEDNAGEL
IP DEPT., BOSE MCKINNEY & EVANS, LLP
135 NORTH PENNSYLVANIA STREET
SUITE 2700
INDIANAPOLIS , IN 46204

TITLE

PATIENT POSITION DETECTION APPARATUS FOR A BED

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/264,174	03/05/99	340	2736	7175-61512

APPLICANT

STEVE A. DIXON, HAMILTON, OH; DOUGLAS J. MENKEDICK, GUILFORD, IN;
WILLIAM L. JACQUES, BATESVILLE, IN; JAMES W. JONES, GAINESVILLE, FL;
JAMES K. FINDLAY, FISHERS, IN; JACK WILKER JR., SHELBYVILLE, IN;
EUGENE E. OSBORNE, HEBRON, KY.

****CONTINUING DOMESTIC DATA*******

VERIFIED

VTN

****371 (NAT'L STAGE) DATA*******

VERIFIED

VTN

****FOREIGN APPLICATIONS*******

VERIFIED

VTN

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 03/24/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OH	SHEETS DRAWING 14	TOTAL CLAIMS 67	INDEPENDENT CLAIMS 5
Verified and Acknowledged Examiner's Initials _____ Initials _____					

ADDRESS

BARNES & THORNBURG
11 SOUTH MERIDAN STREET
INDANAPOLIS IN 46204

TITLE

PATIENT POSITION DETECTION APPARATUS FOR A BED

FILING FEE RECEIVED	FEEs: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
\$1,892		